


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000111053 1. Entity Name BORMETT COURT REPORTING, INC.	
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Principal Place of Business C/O PATRICIA LEE BORMETT 2450 COMPASS POINTE DR. VERO BEACH, FL 32966	Mailing Address C/O PATRICIA LEE BORMETT 2450 COMPASS POINTE DR. VERO BEACH, FL 32966
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04102008 No Chg-P CR2E054 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1061864	Applied For (Not Applicable)
5. Certificate of Status Desired <input type="checkbox"/>	\$6.75 Additional Fee Required

8. Name and Address of Current Registered Agent

**BORMETT, PATRICIA LEE
2450 COMPASS POINTE DRIVE
VERO BEACH, FL 32966**

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. I am familiar with and accept the obligations of registered agent.

SIGNATURE _____
Signature types or printed name in regular script and date of approval. (Not Registered Agent signature required when released.)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
NAME BORMETT, PATRICIA LEE STREET ADDRESS 2450 COMPASS POINTE DRIVE CITY-STATE-ZIP VERO BEACH, FL 32966	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

DO NOT WRITE IN THIS SPACE

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05/10/06-80108-023 150.00

13. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 178, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, if I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other the disclosures.

SIGNATURE: *Patricia Lee Bormett* 04/14/06 954-804-4120
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day Certificate Fee \$4